



#6
5-3100
[Signature]

Practitioner's Docket No. KLR: 7146.017

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Gillihan, Thomas

Group Art Unit: 2722

Serial No.: 09/128,580

Examiner: Popovici, D.

Filed : 08/04/98

Title : PRINTER CONTROLLER FOR ERROR RECOVERY WITH MULTIPLE LANGUAGE CAPABILITY

Chernoff, Vilhauer, McClung & Stenzel, L.L.P.
1600 ODS Tower
601 SW Second Avenue
Portland, Oregon 97204
Telephone No. (503) 227-5631
FAX No. (503) 228-4373

May 16, 2000

RECEIVED
MAY 26 2000
TECH CENTER 2700

Assistant Commissioner for Patents
Washington, DC 20231

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for the above captioned application.

STATUS

2. Applicant is:

☐ a small entity. A statement:

☐ is attached

☐ was already filed.

☒ other than a small entity.

EXTENSION OF TIME

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. §1.136 apply.

05/24/2000 KZEMIEI 00000019 09128580
01 FC:117
670.00 00

- (a) ☒ Applicant petitions for an extension of time under 37 C.F.R. § 1.136(a)
(fees: 37 C.F.R. § 1.17(a)(1)-(4) for the total number of months checked below:)

	Extension (months)	Fee for other than small entity	Fee for small entity
<input type="checkbox"/>	one month	\$110.00	\$ 55.00
<input type="checkbox"/>	two months	\$380.00	\$ 190.00
<input checked="" type="checkbox"/>	three months	\$870.00	\$ 435.00
<input type="checkbox"/>	four months	\$1,360.00	\$ 680.00

FEE: \$870.00

If an additional extension of time is required, please consider this a petition therefor.

- ☐ An extension for __ months has already been secured and the fee paid therefor of \$__
is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request: \$0.00

or

- (b) ☐ Applicant believes that no extension of term is required. However, this conditional
petition is being made to provide for the possibility that applicant has inadvertently
overlooked the need for a petition and fee for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. §1.16(b) -(d) has been calculated as shown below:

Claims remaining after amendment		Highest No. previously paid for		Present extra	Rate		Additional Fee
					Small entity	Other than a small entity	
Total	minus	20	* =	0	\$9	\$18	\$0
Indep	minus	3	** =	0	\$39	\$78	\$0
<input type="checkbox"/> First Presentation of Multiple Dep. Claim					\$130	\$280	\$0

*If the highest number of claims previously paid for is less than 20; enter 20.

**If the highest number of independent claims previously paid for is less than 3; enter 3.

(c) ☐ Total additional fee for claims required.

\$0.00

(d) ☐ No additional fee for claims required.

FEE PAYMENT

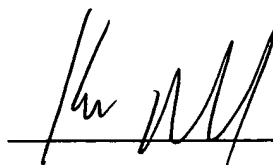
5. ☒ Attached is a check in the sum of \$870.00

☐ Charge Account No. _____ the sum of \$0.00

FEE DEFICIENCY

6. ☒ If any additional extension and/or fee is required, charge Account No. 03-1550

Tel. No. 503.227.5631



Kevin L. Russell

Reg. No. 38,292